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A CENTRAL	OBAITT A I	Į.	Application Number	10/695,4	10/695,402		
TRANSMITTAL FORM  (to be used for all correspondence after initial filing)			Filing Date	October	October 28, 2003		
			First Named Inventor	Thomas	Thomas Hathaway		
			Art Unit	1725	1725		
		E	Examiner Name Ing		Hour Lin		
Total Number of Pages	in This Submission	1	Attorney Docket Number	3562-000	0038		
		ENCLOSU	JRES (check all that apply)				
Fee Transmittal Fo	Fee Transmittal Form		Drawing(s)		After Allowance Communication to Technology Center (TC)		
Fee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
Amendment / Repl	у	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After Final			Convert to a al Application	Propri	Proprietary Information		
Affidavits/decla	aration(s)		Attorney, Revocation f Correspondence Address	☐ Status	Status Letter		
Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):		
Express Abandonn		Request f	or Refund	Re fo pa	Pre-Appeal Brief Request for Review; Reasons for Request for Pre-Appeal Brief Review (5 pages); and Return Receipt		
	Information Disclosure Statement		1	Po	ostcard		
Certified Copy of Priority Document(s)		Remarks					
Response to Missin							
Response to M Parts under 37 1.52 or 1.53							
	SIGNA	TURE OF AP	PLICANT, ATTORNEY,	OR AGENT			
Firm or Individual name	Harness, Dickey & Pierce, P.L.		Attorney Name David L. Suter Jennifer M. Woodside Wojtala		Reg. No. 30,692 50,721		
Signature	Beunfo	Zoads	de Zbjtala				
Date	March 15, 2006						
	C	ERTIFICATE	OF TRANSMISSION/MA	ILING			
I hereby certify that th Service with sufficient Alexandria, VA 22313-	t postage as first	class mail in a	ile transmitted to the USPTon envelope addressed to:	O or deposite Commissione	d with the United States Postal r for Patents, P.O. Box 1450,		
Typed or printed name David L. Suter / Jennifer N			Voodside Wojtala	Express Mail Label No.	EV 853 855 839 US (3/15/2006)		
Signature Sumfr 300			ide xo tala	Date	March 15, 2006		

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Application Number   Application Number   Application Number   Files   Files   For FY 2006   Files   Application Type   For St   Small Entity	Fees Ersuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known							
Application   Free   Search	P %\				Application Number 10/695,402							
Application   State   Application   Applic	= 2006				Date	October 28, 2003						
Application small entity status. See 37 CFR 1.27   Examiner Name   Ing Hour Lin   1725   At Unit   1725   At Unit   1725   Attorney Docket No. 3562-000038	յուն 1 5 քաս 👸 for FY 2006				Named Inventor	Thomas Hathaway						
METHOD OF PAYMENT (check all that apply)   Method OF PAYMENT (che	Application claims small e	<b>*</b> /				Ing Hour Lin						
METHOD OF PAYMENT (check all that apply)  Scheck Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number 08-0750 Deposit Account Name: Harness, Dickey & Pierce, PLC  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Nonerge and diditional fee(s) or underpayments of fee(s) Lender 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Application Type Fee (s) Fee(s) Fee				Art Ur	nit							
Check	TOTAL AMOUNT OF PAYN	MENT	(\$) 500	Attorr	ney Docket No.	3562-000038						
Check	METHOD OF PAYMENT											
Deposit Account Deposit Account Number: 08-0750    Deposit Account Name: Harness, Dickey & Pierce, PLC												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee												
Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   Charge any additional fee(s) or underpayments of fee(s)   Credit any overpayments   Under 37 CFR 1.16 and 1.17*  WARNING: Informations the form map Johns public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES   SEARCH FEES   Small Entity	1		<del></del>	or is hereby	-		**	X 1 10100, 1 20				
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity  Application Type Fee(s) Fee			•	.01 13 110100	_			ant for the filing fee				
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    FEE CALCULATION				nts of fee(s	) 🔼 Cred	dit any overpayment	ts					
TEE CALCULATION	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card											
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Name	1. BASIC FILING, SEAR	CH, AN	ND EXAMINATION F	EES								
Application Type   Fee (\$)   Fee (	1	FILING		SEARCH								
Utility   300   150   500   250   200   100	Application Type	Faa (\$\		F00(\$)								
Design   200   100   100   50   130   65	-		<del></del>					1 cc3 1 did (\$\psi_1\$)				
Plant   200   100   300   150   160   80				<del>-</del>								
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				300	150	160	80					
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee(\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee(\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee(\$) Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Number of each additional 50 or fraction thereof  Fee (\$) Fee Paid (\$)  Fee Paid (\$)		300	150	500	250	600	300					
Fee Description   Each claim over 20 (including Reissues)   50   25	Provisional	200	100	0	0	0	0					
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Pee(\$)  Pee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Extra Claims  Fee(\$)  Fee Paid (\$)  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  Fee Paid (\$)	2. EXCESS CLAIM FEES	S						Small Entity				
Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee(\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee(\$)  Fee Paid (\$)  ———————————————————————————————————	Fee Description						Fee (\$)	Fee (\$)				
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): #1401 - Notice of Appeal  SUBMITTED BY						···· ·-··						
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Signature Deurifu Eodor de Sojtala Registration No. (Attorney/Agent) 30,692/50,721 Telephone (248) 641-1600	SUBMITTED BY					<del></del>						
[ Alloniey/Ageiii) [ [ Alloniey/Ageiii]	Signature	unit	w Xgodoide XA	tale	T	30,692 / 50.721	Teleph	none (248) 641-1600				
Name (Print/Type) David L. Suter / Jennifer M. Woodside Wojtala Date March 15, 2006					(Attorney/Agent)							

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